#### FORM



1261827

## UNITED STATES

URITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB AP	PROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated averag	e burden
hours per respons	se 100

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Prefix			Serial
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Name of Offering ( check if this is an amendment and name has changed, and indicate changed	e).
ConAm Highland Park LLC	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule	e 506
Type of Filing:   ☐ New Filing ☐ Amendment	
A. BASIC IDENTIFICATION DATA	NG28 4000) //
Enter the information requested about the issuer	
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate	change.)
ConAm Highland Park LLC	181/8
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3990 Ruffin Road, Suite 100, San Diego, California 92123-1826	(858) 614-7200
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	BBACESSFI
Brief Description of Business Build, develop, own and operate 244-unit apartmen	nt project in Roseville, CA.
Type of Business Organization	AUG 29 2003
□ corporation □ limited partnership, already formed	other (please specify):
□ business trust □ limited partnership, to be formed	limited liability company THOMSON FINANCIAL
Actual or Estimated Date of Incorporation or Organization:    Month     0   7	Year  0 3 ⊠ Actual □ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abb CN for Canada; FN for other foreign jurisdiction)	reviation for State:

## GENERAL INSTRUCTIONS

### Federal:

Who Must file: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Enter the information requested for	the following:			
• Each promoter of the issuer, if the	issuer has been organized v	vithin the past five years;		
<ul> <li>Each beneficial owner having the p securities of the issuer;</li> </ul>	ower to vote or dispose, or	direct the vote or disposition	of, 10% or more	of a class of equity
	of corporate issuers and of	f corporate general and manag	ging partners of th	e partnership issuers;
Each general and managing partner	of partnership issuers.			
		□ Evecutive Officer	□ Director	Y Ceneral and/or
Check Box(es) that Apply. Ex Promoter	Deficited Owler	- Executive Officer		
Full Name (Last name first, if individual)		=		
Continental American Properties, Ltd.				
	Each executive officer and director of corporate issuers and of corporate general and managing partners of the partnership issuers; and Each general and managing partner of partnership issuers.  Box(es) that Apply:  Promoter			
3990 Ruffin Road, Suite 100, San Die	go, California 92123-18	26		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	⊠ Director	
Full Name (Last name first, if individual)	,			
Epstein, Daniel J.		_		
Business or Residence Address (Number and	nd Street, City, State, Zip C	ode)		
3990 Ruffin Road, Suite 100, San Die	go, California 92123-18	26		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	
Full Name (Last name first, if individual)				
Forrester, J. Bradley		=		
Business or Residence Address (Number and	nd Street, City, State, Zip C	Code)		
3990 Ruffin Road, Suite 100, San Die	go, California 92123-18	26		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	
Full Name (Last name first, if individual)				
Svatos, Robert				
		·		
3990 Ruffin Road, Suite 100, San Die	go, California 92123-18	26		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	ĭ Executive Officer	☐ Director	
Full Name (Last name first, if individual)				
Tilley, Ralph W.			_	
•	• • • • • • • • • • • • • • • • • • • •	ŕ		
3990 Ruffin Road, Suite 100, San Die	go, California 92123-18	26		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	⊠ Executive Officer	☐ Director	
Full Name (Last name first, if individual)				
Dupree, E. Scott			· · · · · · · · · · · · · · · · · · ·	
Business or Residence Address (Number and	nd Street, City, State, Zip C	Code)		
3990 Ruffin Road, Suite 100, San Die	go, California 92123-18	26		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	nd Street, City, State, Zip C	Code)		
(Use blank		ditional copies of this sheet, a	as necessary)	

A. BASIC IDENTIFICATION DATA

~ , 2				B. IN	NFORMAT	TON ABO	UT OFFE	RING				
											Yes	No
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								X			
	Answer also in Appendix, Column 2, if filling under ULOE.											
2.	What is the minimum investment that will be accepted from an individual? *unless otherwise determined by Manager								\$ 20,0	000*		
											Yes	No
3.	Does the of	fering perm	it joint own	ership of a	single unit	?	•••••				$\boxtimes$	
4.	Enter the in any commis the offering SEC and/or listed are as dealer only.	ssion or sim . If a perso with a sta ssociated po	nilar remune on to be list te or states, ersons of su	eration for ed is an as list the na	solicitation sociated pe ame of the	of purchas rson or age broker or o	ers in conn nt of a bro lealer. If n	ection with ker or deale nore than fi	sales of sec r registered ve (5) pers	curities in d with the ons to be		
Full Nar	me (Last nam	e first, if in	dividual)									
Busines	s or Residenc	e Address	(Number a	nd Street, (	City, State,	Zip Code)				•		
Name o	f Associated	Broker or D	Dealer									
States in	Which Perso										_	
[AL]	(Check "All [AK]	States" or [AZ]	[AR]	ridual State [CA]	s) [CO]	[CT]	[DE]	[DC]	[FL]	[GA]	 [HI]	All States [ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
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Busines	s or Residenc	e Address	(Number a	ind Street,	City, State,	Zip Code)						
Name o	f Associated	Broker or I	Dealer									
States in	n Which Perso	on Listed H	las Solicited	l or Intends	to Solicit F	urchasers		<del> </del>				
C A Y 7	(Check "Al				•							All States
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC] me (Last nam	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ruii Na	me (Last nam	e iirsi, ii in	idividuai)									
Busines	s or Residence	e Address	(Number a	and Street,	City, State,	Zip Code)					,	
Name o	f Associated	Broker or I	Dealer									
States in	n Which Pers	on Listed H	Ias Solicited	l or Intends	to Solicit F	Purchasers						
	(Check "Al	l States" or	check indiv	idual State	:s)						🗆	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	(IN)	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)  $$\rm 3\ of\ 8$$ 

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Type of Security Debt	\$	\$
	Equity	\$	\$
	□ Common □ Preferred	\$	\$
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify <u>LLC Membership Interests</u> )	\$ 5,640,000	\$ 225,000
	Total	\$ 5,640,000	\$ 225,000
	Answer also in Appendix, Column 3, if filing under ULOE.	\$ <u>0,040,000</u>	Ψ223,000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number	Aggregate Dollar
	Accredited Investors	Investors 3	Amount of Purchases \$225,000
	Non-accredited Investors	0	\$ <u>223,000</u> \$0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		Ψ
	indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.  Type of Offering	Type of Security	Dollar Amount Sold
	->F		
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs and mailing		\$_1,332
	Legal Fees		\$ 4,440
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) <u>filing fees</u>		\$740
	Total	<u></u>	\$ 6,512
	4 of 8		

Ralpi	n W. Tilley	Vice President of DJE Continental American I						
Name	of Signer (Print or Type)	Title of Signer (Print or Ty	/pe)					- · · ·
ConA	m Highland Park LLC	auth				8'-		ン 
Issuer	(Print or Type)	Signature			D	ate	سر کمیا یا	03
signat	suer has duly caused this notice to be signed by the ure constitutes an undertaking by the issuer to furn nation furnished by the issuer to any non-accredited	ish to the U.S. Securities and Exc	hange	Comn	nission, upon			
###.Y		D. FEDERAL SIGNATURE					TĮŅĘ,	
	Column Totals  Total Payments Listed (column totals added)		×	\$	3,105,551	⊠ 5,633,5	\$ 506	2,527,955
				\$			\$	
	organization and other transaction c	osts		\$		$\boxtimes$	\$	11,956
	Other (specify):	•••••••••••••••••••••••••••••••••••••••		φ			φ	4,550
	Repayment of indebtedness Interest on adv.  Working capital		☒	\$	69,069	□	\$ \$	4,550
	another issuer pursuant to a merger)			\$			\$	
	Acquisition of other businesses (including the this offering that may be used in exchange for							
	Construction or leasing of plant buildings and	facilities		\$		$\boxtimes$	\$	2,511,449
	Purchase, rental or leasing and installation of n	nachinery and equipment		\$			\$	<del> </del>
	Purchase of real estate		X	\$	3,036,482		\$	
	Salaries and fees			( Di	Officers, rectors, & Affiliates			yments To Others
5.	Indicate below the amount of the adjusted gross proposed to be used for each of the purposes show is not known, furnish an estimate and check the bototal of the payments listed must equal the adjuste forth in response to Part C - Question 4.b above.	n. If the amount for any purpose ox to the left of the estimate. The		D.	yments to			
	4.a. This difference is the adjusted gross proceeds	s to the issuer."						33,506